

Fee Calculation Sheet
(For Use with Form PTO-875)

10/591641

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
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| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| TOTAL CLAIMS | 8 | [REDACTED] | 13 | [REDACTED] | | [REDACTED] |

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| TOTAL DEP. | | | ← | | ← | ← |
| TOTAL CLAIMS | | | [REDACTED] | | [REDACTED] | [REDACTED] |